Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 3/24/03.

I. DISPUTE

Whether there should be additional reimbursement for 00600 – anesthesia, dated 8/20/02 and reduced per "N" – not documented and "C" – paid per PPO contract.

II. RATIONALE

Regarding the payment under "C" – PPO contract, the requestor submitted a letter to the carrier, dated 3/3/99, terminating the contract with the carrier. On this basis, the payment made by the carrier, under PPO, was not only for the incorrect amount but also verified the carrier had sufficient documentation to make payment. Payment is recommended as per the Medical Fee Guideline.

Per the Medical Fee Guideline, Anesthesia Ground Rules, (I)(B), "The total anesthesia value (TAV) for each procedure is defined by adding a basic value, which is related to the complexity of the service, plus modifying units (if any), plus time units." Payment is due based upon:

Procedure Code:	00600-46	=	10	units	
Time:	9:30-10:15	=	3	units	
	Total $=$ 13		13 uı	units	
	13 units x \$35.00 =		\$455.00		
	Less previously		d	\$105.00	
	Total amount due			\$350.00	

However, the requestor states the amount in dispute is \$320.00. The Commission is unable to Order more than requested by the requestor. On this basis, reimbursement of \$320.00 is recommended.

III. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for 00600-46 in the amount of **\$320.00**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$320.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 13th day of October, 2004.

Noel L. Beavers Medical Dispute Resolution Officer Medical Review Division

NLB/nlb